Case 24-10897-BFK Doc 1 Filed 05/13/24 Entered 05/13/24 09:32:44 Desc Main Document Page 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Glyn First name Neal	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Owen Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any assumed, trade names and doing business as names.		
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9409	

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Debtor 1 Glyn Neal Owen Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.	EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1131 Tournai Court Woodbridge, VA 22191 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Prince William County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? □ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

Glyn Neal Owen

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Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S. C. § I am not filing under Chapter 11. No. 1182(1)? For a definition of small I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

Debtor 1

Glyn Neal Owen

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Debtor 1 Glyn Neal Owen Case number (if known)

Part 5: Explain

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part 5 Answer These Questions for Reporting Purposes	Deb	tor 1 Glyn Neal Owen			Case nu	umber (if known)
Individual primarily for a personal, family, or household purpose."	Part	6: Answer These Quest	ions for R	eporting Purposes		
Yes. Go to line 17.	16.		16a.			e defined in 11 U.S.C. § 101(8) as "incurred by an
16b.				☐ No. Go to line 16b.		
money for a business or investment or through the operation of the business or investment. No. Go to line 16c. State the type of debts you owe that are not consumer debts or business debts				Yes. Go to line 17.		
No. Go to line 16c. res. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under Chapter 7. Go to line 18. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured deditors? 18. How many Creditors do you estimate that you owe? State 1			16b.			
Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts				•		
17. Are you filling under Chapter 7. Go to line 18. Tam not filing under Chapter 7. Go to line 18.				_		
17. Are you filing under Chapter 7. Go to line 18. 18. How many Creditors do you estimate that strong years are paid that funds will be available to distribute to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How many Creditors do you estimate that you owe? 19. How many Creditors do you estimate that you owe? 19. How many Creditors do you estimate that you owe? 19. How many Creditors do you estimate that you owe? 19. How much do you estimate that you owe? 19. How much do you estimate your assets to be worth? 20. How much do you estimate your labilities to be? 10. Soo,001 - \$100,000			16c.		u owe that are not consumer debts or bu	siness debts
Chapter ?? Do you estimate that after any exempt property is excluded and administrative expense are paid that funds will be available to distribute to unsecured creditors? No						
after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate that you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your faster to be worth? 19. How much do you estimate your faster to be worth? 20. How much do you estimate your faster to be worth? 20. How much do you estimate your liabilities to be? 21. How much do you estimate your flabilities to be? 22. How much do you estimate your flabilities to be? 23. Spond - \$100,000	17.		■ No.	I am not filing under Chap	ter 7. Go to line 18.	
No available for distribution to unsecured creditors? No Yes 1,000-5,000 25,001-50,000 25,001-50,000 50,001-10,000 50,001-10,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,001-25,000 10,0001-25,0001-25,000 10,0001-25,000		after any exempt	☐ Yes.			
be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 20. How much do you estimate your liabilities to be? 21. How much do you estimate your liabilities to be? 22. How much do you estimate your liabilities to be? 23. How much do you estimate your liabilities to be? 24. How much do you estimate your liabilities to be? 25. S50,000 26. S50,000 27. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). 18. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. 19. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1515 and 3571. 27. Signature of Debtor 1 28. Executed on May 13, 2024 29. Executed on May 13, 2024 20. How much do you estimate that you of the stream of the petition.		administrative expenses		□ No		
18. How many Creditors do you estimate that you owe? 1,49				☐ Yes		
you estimate that you owe? 50-99		distribution to unsecured				
you estimate that you owe? 50-99	18.	How many Creditors do	■ 1 ₋ 40		□ 1.000-5.000	□ 25 001-50 000
100-199		you estimate that you		,		
19. How much do you estimate your assets to be worth? \$0.\$50,000		owe:	□ 100-1	99	□ 10,001-25,000	☐ More than100,000
estimate your assets to be worth? \$50,001 - \$100,000			□ 200-9	99		
be worth? \$10,0001 - \$500,000	19.				■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
20. How much do you estimate your liabilities to be? \$0 - \$50,000		-				
20. How much do you estimate your liabilities to be? \$50,000 \$\$0,001 - \$100,000 \$\$10,0001 - \$50 million \$\$50,000,001 - \$10 billion \$\$50,000 \$\$50,000 \$\$50,000 \$\$50,000 \$\$50,000 \$\$50,000 \$\$50,0001 - \$10 million \$\$10,000,001 - \$50 billion \$\$10,000,000,001 - \$50 billion \$\$10,000,000,001 - \$50 billion \$\$10,000,000,001 - \$50 billion \$\$100,000,001 - \$100 bi						—
estimate your liabilities to be? \$50,001 - \$100,000			— \$000,		□ \$100,000,001 - \$500 million	Note than \$60 billion
estimate your habilities to be? \$1,000,001 - \$100,000	20.		□ \$0 - \$	50,000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1518 and 3571. Is/Glyn Neal Owen Glyn Neal Owen Signature of Debtor 2 Executed on May 13, 2024 Executed on		-		· ·	☐ \$10,000,001 - \$50 million	
For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Isl Glyn Neal Owen Glyn Neal Owen Signature of Debtor 2 Executed on May 13, 2024 Executed on						— • • • • • • • • • • • • • • • • • • •
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Is/Glyn Neal Owen Glyn Neal Owen Signature of Debtor 2 Signature of Debtor 2 Executed on May 13, 2024 Executed on			— ф500,		□ \$100,000,001 - \$500 millior	More than \$50 billion
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1518 and 3571. Is/S Glyn Neal Owen Glyn Neal Owen Signature of Debtor 2 Signature of Debtor 1 Executed on May 13, 2024 Executed on	Part	7: Sign Below				
United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. //s/ Glyn Neal Owen Glyn Neal Owen Signature of Debtor 2 Executed on May 13, 2024 Executed on	For	you	I have ex	amined this petition, and I c	declare under penalty of perjury that the i	information provided is true and correct.
document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. /s/ Glyn Neal Owen Glyn Neal Owen Signature of Debtor 2 Signature of Debtor 1 Executed on May 13, 2024 Executed on						
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. /s/ Glyn Neal Owen Glyn Neal Owen Signature of Debtor 2 Signature of Debtor 1 Executed on May 13, 2024 Executed on						
bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. /s/ Glyn Neal Owen Glyn Neal Owen Signature of Debtor 1 Executed on May 13, 2024 Executed on Executed on			I request	relief in accordance with th	e chapter of title 11, United States Code	, specified in this petition.
Glyn Neal Owen Signature of Debtor 2 Signature of Debtor 1 Executed on May 13, 2024 Executed on			bankrupt and 3571	cy case can result in fines u I.		
Signature of Debtor 1 Executed on May 13, 2024 Executed on					Signature of C)ehtor 2
					Oignature of D	
MM / DD / YYYY MM / DD / YYYY			Executed	,,	Executed on	
				MM / DD / YYYY		MM / UU / YYYY

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Debtor 1 Glyn Neal Owen Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michae	l J. O. Sandler	Date	May 13, 2024
Signature of	Attorney for Debtor		MM / DD / YYYY
Michael J.	O. Sandler		
Fisher-Sai	ndlor II C		
Firm name	idler, LLC		
12801 Dar	by Brooke Court		
Suite 201	•		
Woodbrid	ge, VA 22192		
Number, Street,	City, State & ZIP Code		
Contact phone	703-494-3323	Email address	sandlerlaw@yahoo.com
46443 VA			
Day number 0 C	lata		

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Fill in this infor	mation to identify your	case:	J	
Debtor 1	Glyn Neal Owen			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA	
Case number				
(if known)				Check if this is a
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	840,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	652,657.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,492,657.00
Pa	t 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	471,459.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	1,193,732.00
	Your total liabilities	\$	1,665,191.00
⊃a	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	16,592.94
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,181.36
Рa	t 4: Answer These Questions for Administrative and Statistical Records		
δ.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Glyn Neal Owen Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$_____\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	I
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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17 III III UNIS I	information to identify y	our case and th	Document	Page 10 of 59			
Debtor 1	Glyn Neal Ow		<u> </u>				
	First Name		Name	Last Name			
Debtor 2 Spouse, if filing	g) First Name	Middle	Name	Last Name			
United State	es Bankruptcy Court for the	ne: EASTERN	DISTRICT OF VIRO	GINIA			
Case numb	per						Check if this is an amended filing
Scheon each categhink it fits be information. It has were every	est. Be as complete and ac If more space is needed, at	scribe items. List a curate as possibl tach a separate sl	e. If two married peo neet to this form. On	If an asset fits in more than one ple are filing together, both are the top of any additional pages Own or Have an Interest In	equally respon	sible for suppl	ying correct
□ No. Go ■ Yes. W	to Part 2. /here is the property?		What is the prope				
	Tournai Court		Single-famil	erty? Check all that apply ly home	Do not deduc	t secured claims	s or exemptions. Put
Street ac	ddress, if available, or other descr		Single-famil Duplex or m Condominiu Manufacture	- ,,,	the amount of Creditors Who	f any secured cla o <i>Have Claims</i> S e of the C	aims on Schedule D: Secured by Property. Surrent value of the
Street ac		22191-0000 ZIP Code	Single-famil Duplex or m Condominiu Manufacture Land Investment Timeshare Other	ly home nulti-unit building um or cooperative ed or mobile home property est in the property? Check one	Current value entire proper \$840	e of the Cty? p,000.00	aims on Śchedule D: Secured by Property.

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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3. C a		wen	Case number (if known)	
	ırs, vans, trucks, trad	ctors, sport utility vehicles, motorcycles		
	No			
	Yes			
3.1	Make: Lincoln Model: MKZ	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any se	d claims or exemptions. Put cured claims on <i>Schedule D:</i> Claims Secured by Property.
	Year: 2014 Approximate mileage:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	
	Other information:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$12,581.0	0 \$12,581.00
5 A 0	Yes dd the dollar value o ages you have attach	f the portion you own for all of your entries from Part 2, including ned for Part 2. Write that number here		\$12,581.00
Do y	ou own or have any	legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	ousehold goods and	furnishings nces, furniture, linens, china, kitchenware		
	No Yes. Describe	ices, idinitale, illens, clina, kitchenware		
	No	Dining set & chairs, kitchen table & chairs, sofa,5 chairs tables, 4 end tables, 10 lamps, 2 beds, 2 dressers, desk, kitchenware, large & small appliances, armoir		\$2,000.00
7. El 6	Yes. Describe ectronics examples: Televisions a	Dining set & chairs, kitchen table & chairs, sofa,5 chairs tables, 4 end tables, 10 lamps, 2 beds, 2 dressers, desk,	linens,	
7. El 6	Pectronics Examples: Televisions a including cell No	Dining set & chairs, kitchen table & chairs, sofa,5 chairs tables, 4 end tables, 10 lamps, 2 beds, 2 dressers, desk, kitchenware, large & small appliances, armoir	linens,	\$2,000.00 ections; electronic devices
7. Ele Example 1	ectronics xamples: Televisions a including cel No Yes. Describe	Dining set & chairs, kitchen table & chairs, sofa,5 chairs tables, 4 end tables, 10 lamps, 2 beds, 2 dressers, desk, kitchenware, large & small appliances, armoir and radios; audio, video, stereo, and digital equipment; computers, pring phones, cameras, media players, games	nters, scanners; music colle	ections; electronic devices \$800.00
7. Ele Ex	ectronics examples: Televisions a including cel No Yes. Describe	Dining set & chairs, kitchen table & chairs, sofa,5 chairs tables, 4 end tables, 10 lamps, 2 beds, 2 dressers, desk, kitchenware, large & small appliances, armoir and radios; audio, video, stereo, and digital equipment; computers, print I phones, cameras, media players, games 2 televisions, laptop, tablet, cell phone	nters, scanners; music colle	ections; electronic devices \$800.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

Case 24-10897-BFK Doc 1 Filed 05/13/24 Entered 05/13/24 09:32:44 Page 12 of 59 Document Debtor 1 Glyn Neal Owen Case number (if known) ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... Pistol \$100.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$500.00 Misc. clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$500.00 Wedding band 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe..... \$3.00 3 dogs 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4.003.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

Institution name:

Bank of America

\$0.00

Checking and

17.1. Savings

□ No

■ Yes.....

Case 24-10897-BFK Doc 1 Filed 05/13/24 Entered 05/13/24 09:32:44 Page 13 of 59 Document Debtor 1 Glyn Neal Owen Case number (if known) **PNC Bank** \$0.00 17.2. Checking \$500.00 **Green Dot** 17.3. Checking Coinbase \$1,131.00 Cryptocurrency 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: ■ Yes..... E-trade account (\$102,400 potential value) -- balance listed is vested \$1,310.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) T. Rowe Price \$7.500.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ☐ No

■ Yes...... Issuer name and description.

Athene Annuity \$622,632.00

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1)
■ No

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

Case 24-10897-BFK Doc 1 Filed 05/13/24 Entered 05/13/24 09:32:44 Desc Main Document Page 14 of 59 Debtor 1 Glyn Neal Owen Case number (if known) 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: \$3,000.00 **New York Life Whole Policy** Spouse 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$636,073.00

Filed 05/13/24 Case 24-10897-BFK Doc 1 Entered 05/13/24 09:32:44 Page 15 of 59 Document Debtor 1 Glyn Neal Owen Case number (if known) Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$840,000.00 56. Part 2: Total vehicles, line 5 \$12,581.00 57. Part 3: Total personal and household items, line 15 \$4,003.00 58. Part 4: Total financial assets, line 36 \$636,073.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$652,657.00 \$652,657.00

\$1,492,657.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 6

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mation to identify your	case:			
Glyn Neal Owen				
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
inkruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
			_	Check if this is an amended filing
	Glyn Neal Owen First Name First Name	First Name Middle Name First Name Middle Name	Glyn Neal Owen First Name Middle Name Last Name First Name Middle Name Last Name	Glyn Neal Owen First Name Middle Name Last Name First Name Middle Name Last Name nkruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	identity	tne Property	You Claim as	Exempt

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	1131 Tournai Court Woodbridge, VA 22191 Prince William County	\$840,000.00		\$25,000.00	Va. Code Ann. § 34-4
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	Dining set & chairs, kitchen table & chairs, sofa,5 chairs, 2 coffee tables,	\$2,000.00		\$2,000.00	Va. Code Ann. § 34-26(4a)
	4 end tables, 10 lamps, 2 beds, 2 dressers, desk, linens, kitchenware, large & small appliances, armoir Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
	2 televisions, laptop, tablet, cell phone	\$800.00		\$800.00	Va. Code Ann. § 34-26(4a)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Coin collection Line from Schedule A/B: 8.1	\$100.00		\$100.00	Va. Code Ann. § 34-4
	LINE HOTH Schedule PAD. U.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Glyn Neal Owen			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Pistol Line from Schedule A/B: 10.1	\$100.00		\$100.00	Va. Code Ann. § 34-26(4b)
			100% of fair market value, up to any applicable statutory limit	
Misc. clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	Va. Code Ann. § 34-26(4)
			100% of fair market value, up to any applicable statutory limit	
Wedding band Line from Schedule A/B: 12.1	\$500.00		\$500.00	Va. Code Ann. § 34-4
Ellio Ilolii Gollegalo / V.B. I El li			100% of fair market value, up to any applicable statutory limit	
3 dogs Line from Schedule A/B: 13.1	\$3.00		\$3.00	Va. Code Ann. § 34-26(5)
Ellio Ilolii Gofficadio 70 B. 1011			100% of fair market value, up to any applicable statutory limit	
Checking: Green Dot Line from Schedule A/B: 17.3	\$500.00		\$500.00	Va. Code Ann. § 34-4
Ellio Ilolli Goricadio 70 B. 1110			100% of fair market value, up to any applicable statutory limit	
Cryptocurrency: Coinbase Line from Schedule A/B: 17.4	\$1,131.00		\$1,131.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
E-trade account (\$102,400 potential value) balance listed is vested	\$1,310.00		\$1,310.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit	
401(k): T. Rowe Price Line from Schedule A/B: 21.1	\$7,500.00		\$7,500.00	Va. Code Ann. § 34-34
Ente from Gonedate 7VB. = 111			100% of fair market value, up to any applicable statutory limit	
Athene Annuity Line from Schedule A/B: 23.1	\$622,632.00		\$632,000.00	Va. Code Ann. § 38.2-3122.1
Ellio Ilolii Gofficadio 70 B. 201 1			100% of fair market value, up to any applicable statutory limit	
New York Life Whole Policy Beneficiary: Spouse	\$3,000.00		\$3,000.00	Va. Code Ann. §§ 38.2-3339, 51.1-510
Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every No Yes. Did you acquire the property covere No Yes	3 years after that for ca	ises fil	,	,

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		Document Page 1	.8 01 59		
Fill in this informati	ion to identify you	r case:			
Debtor 1	Glyn Neal Owen				
	First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bankro	uptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		_	
Case number					
(if known)					if this is an ded filing
				amend	ieu iiirig
Official Form 1	106D				
Schedule D	: Creditors	Who Have Claims Secure	ed by Propert	У	12/15
		f two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors hav	e claims secured by	your property?			
☐ No. Check thi	s box and submit th	nis form to the court with your other schedules.	You have nothing else t	to report on this form.	
Yes. Fill in all	of the information I	pelow.			
Part 1: List All S	ecured Claims				
for each claim. If more	than one creditor has	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As all order according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Bank of Ame	erica	Describe the property that secures the claim:	\$12,591.00	\$12,581.00	\$10.00
Creditor's Name		2014 Lincoln MKZ			
Attn: Bankru Po Box 9822 El Paso, TX	34 79998	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City	/, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only		car loan)			
Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
■ At least one of the d Check if this claim community debt		Other (including a right to offset)			
Date debt was incurre	Opened 06/22 Last Active	Last 4 digits of account number 4709	9		

Date debt was incurred 4/30/24

Last 4 digits of account number

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Debtor 1 Glyn Neal	Owen			Case	number (if known)		
First Name	Middle N	ame Last	Name				
2.2 Rocket Mortga	age	Describe the property th	at secures the cla	ıim:	\$458,868.00	\$840,000.00	\$0.00
Creditor's Name		1131 Tournai Court 22191 Prince Willia	.	VA			
Attn: Bankrup 1050 Woodwa Detroit, MI 482	rd Avenue	As of the date you file, the apply. Contingent	ne claim is: Check	all that			
Number, Street, City, S	State & Zip Code	☐ Unliquidated					
Who owes the debt?	check one.	☐ Disputed Nature of lien. Check all	that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you mad car loan)	de (such as mortga	age or secured			
Debtor 1 and Debtor 2	? only	☐ Statutory lien (such as	tax lien, mechanic	's lien)			
At least one of the deb	otors and another	☐ Judgment lien from a la	awsuit				
☐ Check if this claim re community debt	elates to a	☐ Other (including a right	to offset)				
Date debt was incurred	Opened 03/21 Last Active 05/24	Last 4 digits of ac	count number	4061			
Add the dollar value o	f your entries in C	olumn A on this page. Wri	te that number he	ere:	\$471,459	.00	
If this is the last page Write that number her	•	the dollar value totals fron	n all pages.		\$471,459	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 20	of 59		
Fill in this i	nformation to identify your	case:				
Debtor 1	Glyn Neal Owen					
DODIOI 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF VII	RGINIA			
Case number	er					Check if this is an
(,					_	amended filing
						9
Official F	orm 106E/F					
Schedul	le E/F: Creditors W	ho Have Unsecured	d Claims			12/15
Schedule G: E Schedule D: C left. Attach the name and cas	Executory Contracts and Unexp Creditors Who Have Claims Sec	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space i e. If you have no information to r	Do not include a s needed, copy t	any creditors with partially s he Part you need, fill it out, i	secured claim number the e	s that are listed in ntries in the boxes on the
	reditors have priority unsecure					
_ `	o to Part 2.	a olalino agamot you .				
☐ Yes.	o to Fait 2.					
☐ res.						
Part 2: L	ist All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any c	reditors have nonpriority unsec	ured claims against you?				
□ No. Y	ou have nothing to report in this pa	art. Submit this form to the court wi	th vour other sche	dules.		
_	ou have houring to report in the pr	art. Cubinit tino form to the court wi	ar your outor outo	adioo.		
Yes.						
unsecure	d claim, list the creditor separately	aims in the alphabetical order of of for each claim. For each claim list st the other creditors in Part 3.If you	ed, identify what ty	pe of claim it is. Do not list cla	aims already ir	cluded in Part 1. If more
						Total claim
4.1 Bar	nk of America	Last 4 digits of a	count number	3095		\$10,511.00
	priority Creditor's Name				_	· ,
	n: Bankruptcy	When wee the de	ht imaconnad2	Opened 08/18 Last /	Active	
	9 Savarese Circle npa, FL 33634	When was the de	ot incurred?	4/23/24		_
	ber Street City State Zip Code	As of the date yo	u file, the claim i	s: Check all that apply		
Who	incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and	·	ORITY unsecured	l claim:		
	Check if this claim is for a comm	nunity				
debt	i e	☐ Obligations aris		ration agreement or divorce th	at you did not	
_	e claim subject to offset?	report as priority of		malana and atheresissing the	ha.	
= N		·	•	g plans, and other similar debt	.5	
□ Y	'es	Other. Specify	Credit Card			

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Debtor	Glyn Neal Owen		Case number (if known)	
4.2	CGH Technologies, Inc.	Last 4 digits of account number		\$1,170,000.00
	Nonpriority Creditor's Name 600 Maryland Ave SW, Ste 800W Washington, DC 20024	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Judgment		
4.3	Citibank/Best Buy	Last 4 digits of account number	1451	\$1,576.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 08/20 Last Active 4/07/24	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.4	Credit One Bank	Last 4 digits of account number	8156	\$1,289.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 04/23 Last Active 4/22/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	■ Other Specify Credit Card		

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Debtor	1 Glyn Neal Owen		Case number (if known)	
4.5	Credit One Bank	Last 4 digits of account number	3946	\$612.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 05/19 Last Active 04/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	aration agreement or divorce that you did not	
	■ No □ Yes	Other. Specify Credit Card		
4.6	Credit One Bank	Last 4 digits of account number	2794	\$219.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 05/20 Last Active 05/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim: aration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.7	FreedomPlus Nonpriority Creditor's Name	Last 4 digits of account number	3430	\$4,637.00
	Attn: Bankruptcy 1875 South Grant St, Ste 400 San Mateo, CA 94402	When was the debt incurred?	Opened 04/23 Last Active 3/30/24	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans —		
	debt Is the claim subject to offset? ■ No	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	■ No □ Yes	Other. Specify Unsecured	א פיימיים, מוזמ סמינה סווווומו מכטנס	

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Debtor	1 Glyn Neal Owen	Case number (if known)				
4.8	Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	3052	\$2,701.00		
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 05/13 Last Active 5/06/24			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
4.9	Uplft/cb Nonpriority Creditor's Name	Last 4 digits of account number	3954	\$1,343.00		
	Attn: Bankruptcy 440 N. Wolfe Road Sunnyvale, CA 94085	When was the debt incurred?	Opened 3/30/24 Last Active 03/24			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	_					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	<u></u>	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	rration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Unsecured				
4.1	Uplft/cb	Last 4 digits of account number	3962	\$844.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 440 N. Wolfe Road Sunnyvale, CA 94085	When was the debt incurred?	Opened 1/05/24 Last Active 3/27/24			
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Unsecured				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Glyn Neal Owen

Case number (if known)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Gross, Romanick, Dean & Desimo 3975 University Drive Suite 410 Fairfax, VA 22030

On which entry	in Part 1	or Part 2 did	you list the	original creditor?
OII WITICIT CITE	уштаны	UI Fait Z uiu	you list tile	original dieulior:

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim 0.00
Total claims from Part 2	you did not report as priority claims 6h. Debts to pension or profit-sharing plan	Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 1,193,732.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 1,193,732.00

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Fill in this infor				
Debtor 1	Glyn Neal Owen			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

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Fill in thi	is information to identify your	case:			
Debtor 1	Glyn Neal Owen				
Dahtan 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA		
Case nur	mher				
(if known)					Check if this is an amended filing
Officia	al Form 106H				•
	dule H: Your Cod	ebtors			12/15
people ar ill it out, our nam		ally responsible for sup boxes on the left. Attacl . Answer every question	plying correct informati h the Additional Page to n.	on. If more space is not this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
□ No	0				
■ Ye	-				
Arizo	ithin the last 8 years, have you ona, California, Idaho, Louisiana, o. Go to line 3. es. Did your spouse, former spou	Nevada, New Mexico, Pu	uerto Rico, Texas, Washi		
in lir Forn	ne 2 again as a codebtor only i	f that person is a guaran	ntor or cosigner. Make s	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Deliese Owen 1131 Tournai Court Woodbridge, VA 22191			■ Schedule D, li □ Schedule E/F □ Schedule G _ Bank of Americ	, line
3.2	Deliese Owen 1131 Tournai Court Woodbridge, VA 22191			■ Schedule D, li □ Schedule E/F □ Schedule G Rocket Mortgag	, line

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

	in this information	to identify your o					ī				
	in this information btor 1	Glyn Neal O									
_	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	otcy Court for the	: _EASTERN DISTRICT	OF VIRGINIA							
	se number nown)								d filing ent sho	wing postpetition e following date:	
0	fficial Form	<u> 1061</u>					Ī	/IM / DD/ Y	YYY		
S	chedule I:	Your Inc	ome								12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and th you, do not	your spouse include infor	is liv mati	ing with on abou	you, inclu t your spo	ude inf ouse. If	ormation about more space is	your needed,
1.	Fill in your emplinformation.	nployment		Debtor 1	Debtor 1			Debtor 2	or no	n-filing spouse	
	If you have more than one job,		Employment status	■ Employed	d			■ Emplo	oyed		
	attach a separate page with information about additional	_mproyment etatae	☐ Not employed			☐ Not er	mploye	d			
	employers.		Occupation	Associate	Director			Banker			
	Include part-time self-employed wo		Employer's name	Iridium Sa	tellite, LLC			Pinnacl	e Ban	k	
	Occupation may or homemaker, if		Employer's address	1750 Tyso Mc Lean, \	ns Blvd., Su /A 22102	ite 1	100	150 3rd Suite 90 Nashvil	00	ue South 37201	
			How long employed the	nere? 2	years			6	mont	hs	
Pai	rt 2: Give De	etails About Mor	thly Income								
	mate monthly incuse unless you are		ate you file this form. If y	ou have nothir	ng to report for	any	line, write	e \$0 in the	space.	Include your no	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co	embine the info	rmation for all	empl	oyers for	that perso	n on th	e lines below. If	you need
							For De	btor 1		Debtor 2 or -filing spouse	
2.			ry, and commissions (becalculate what the month)			\$	13	,899.99	\$	12,115.78	
3.	Estimate and lis	st monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	13,8	99.99	\$	12,115.78	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Glyn Neal Owen		Case i	number (if known)			
	Con	by line 4 here	4.	For	Debtor 1	For Debto		
_	-	*	٦.	Ψ	13,033.33	Ψ12	.,113.76	
5.	5a. 5b. 5c. 5d. 5e.	all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance	5a. 5b. 5c. 5d. 5e.	\$ \$ \$ \$	3,044.54 0.00 416.00 0.00 385.62	\$	0.00 2,175.88 0.00 4.55	
	5f. 5g. 5h.	Domestic support obligations Union dues Other deductions. Specify: Life Insurance Medical Care Fs	5f. 5g. 5h.+	\$ \$ \$ \$	0.00 0.00 40.37 67.95 32.50	\$ \$ + \$ \$ \$	0.00 0.00 27.56 78.65 0.00	
_		HOI/ACI		\$	59.11	\$	0.00	
6. 7.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. culate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.	\$_ \$	4,046.09 9,853.90		5,376.74 5,739.04	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8a. 8b. nt 8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$,	9,853.90 + \$_	6,739.04	= \$16	5,592.94
11.	Inclu othe	te all other regular contributions to the expenses that you list in <i>Schedu</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur depend	,	,	ed in <i>Schedu</i>	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Centies					Combine	
13.	Do y ■	you expect an increase or decrease within the year after you file this for No. Yes. Explain:	m?				monthly i	income

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify ye	our case:			l		
Deb		Glyn Neal O				Che	ck if this is:	
		Olyll Neal O	WCII				An amended filing	
	tor 2 buse, if filing)						A supplement show 13 expenses as of	wing postpetition chapter
`'	, 0,						·	
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	<u>IA</u>		MM / DD / YYYY	
	e number							
(If Ki	nown)							
\sim	fficial Ec	rm 106 l				-		
		rm 106J						
		J: Your		ISES . If two married people ar	a filing tagether b	oth are equ	ually racpanaible fo	12/15
info	rmation. If m		eded, atta	ch another sheet to this				
Par		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a sonar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoid:				
	= ::	-	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
۷.	Do not list D	•	_	Fill out this information for	Demandantia valet	ionobin to	Donon dont's	Does dependent
	Debtor 2.	ebior i and	☐ Yes.	each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.		enses include		No				
		f people other t d your depende		Yes				
		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this f	orm as a si	unnlement in a Cha	anter 13 case to report
exp				y is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I: Y	our Income		Your exp	enses
(0		,						
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4. :	\$	2,841.00
		led in line 4:	-					
						40	Φ	0.00
		estate taxes rty, homeowner'	e or rentor	'e insurance		4a. 4b.	·	0.00
		•		s insurance upkeep expenses		4b. 4c.	·	135.00
		owner's associa				4d.		341.25
5.	Additional r	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

Debtor 1	Glyn Neal Owen	Case num	ber (if known)	
S. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	400.00
6b.	Water, sewer, garbage collection	6b.	\$	40.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	505.00
6d.	Other. Specify:	6d.	·	0.00
Foo	od and housekeeping supplies	7.	·	800.00
	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	125.00
	sonal care products and services	10.	\$	100.00
	dical and dental expenses	11.	·	50.00
	nsportation. Include gas, maintenance, bus or train fare.		Ψ	30.00
	not include car payments.	12.	\$	530.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	aritable contributions and religious donations	14.	·	100.00
	urance.		· ———	
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	393.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	221.00
	. Other insurance. Specify:	15d.	· .	0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20.		*	0.00
	cify:	16.	\$	0.00
'. Ins	allment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	475.11
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
17d	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not repor		•	850.00
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 10	6I). 18.	· ·	
	er payments you make to support others who do not live with you.	40	\$	0.00
	ecify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on 5 . Mortgages on other property	20a.		0.00
		20a. 20b.		0.00
	. Real estate taxes		·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.		0.00
	. Homeowner's association or condominium dues	20e.	*	0.00
. Oth	er: Specify: Pets	21.	+\$	125.00
. Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	8,181.36
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2	\$	
	. Add line 22a and 22b. The result is your monthly expenses.		\$	8,181.36
220	. Add and 220. The result is your monthly expenses.		Ψ	0,101.30
	culate your monthly net income.		_	
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.		16,592.94
23b	Copy your monthly expenses from line 22c above.	23b.	-\$	8,181.36
230	Subtract your monthly expenses from your monthly income.	23c.	\$	8,411.58
	The result is your monthly net income.	230.	Ψ	0,711.30
For mod	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect liffication to the terms of your mortgage?			e or decrease because o
= 1				
П	Yos Fynlain here:			

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Debtor 1					
	Glyn Neal Owen				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA		
Case number					
(if known)					☐ Check if this is an amended filing
ou must file thi btaining mone	is form whenever you fi	ile bankruptcy schedule	onsible for supplying co	s. Making a false sta	stement concealing property or
ears, or both. 1	Í8 U.S.C. §§ 152, 1341, 1		nkruptcy case can result	in fines up to \$250,6	000, or imprisonment for up to 20
·	ľ8 U.S.C. §§ 152, 1341, 1 In Below		nkruptcy case can result	in fines up to \$250,(
Sig	n Below	1519, and 3571.	nkruptcy case can result		
Sig	n Below	1519, and 3571.			
Sig Did you pa ■ No	n Below	1519, and 3571.		bankruptcy forms? Attach <i>Ba</i>	
Did you pa ■ No □ Yes. I	ay or agree to pay some	eone who is NOT an atto		bankruptcy forms? Attach Ba	on, or imprisonment for up to 20 imprisonmen
Did you pa No Yes. I	n Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct.	eone who is NOT an atto	orney to help you fill out	bankruptcy forms? Attach Ba	on, or imprisonment for up to 20 imprisonmen
Did you part No When Yes. If the year that they are X /s/ Gly Glyn No	ay or agree to pay some Name of person alty of perjury, I declare	eone who is NOT an atto	orney to help you fill out	bankruptcy forms? Attach Ba Declaration ed with this declarate	on, or imprisonment for up to 20 imprisonmen

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Fill in	this inforn	nation to identify you	r case:						
Debto	r 1	Glyn Neal Owen							
D - 1-1-	O	First Name	Middle Name	Last Name					
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	Last Name					
United	d States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA					
Case	number								
(if know	n)				_	Check if this is an amended filing			
○ #:.	sial Fa	m 107							
		<u>rm 107</u> of Financial /	Affairs for Indivi	duals Filing for B	ankruptcy	04/2			
					equally responsible for sup				
		n). Answer every ques		•					
Part 1	Give D	etails About Your Ma	rital Status and Where You	u Lived Before					
1. W	hat is you	current marital statu	ıs?						
	Married Not mar	ried							
2. D	uring the la	est 3 vears, have you	lived anywhere other than	where you live now?					
	During the last 3 years, have you lived anywhere other than where you live now?								
	No Yes. Lis	t all of the places you I	ived in the last 3 years. Do n	ot include where you live now	<i>i</i> .				
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
					ity property state or territor				
	No								
		ke sure you fill out Scl	nedule H: Your Codebtors (O	Official Form 106H).					
Part 2	Explai	n the Sources of You	r Income						
Fi	Il in the tota	I amount of income yo	u received from all jobs and	ng a business during this ye all businesses, including part- ve together, list it only once ur		ndar years?			
] No								
		in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions,	\$95,187.00	☐ Wages, commissions, bonuses, tips	and oxolution			
	-		bonuses, tips ☐ Operating a business		☐ Operating a business				

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De	btor 1 Gl	yn Neal Ow	en		Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December 3	1, 2023)	■ Wages, commissions, bonuses, tips	\$160,000.00	☐ Wages, combonuses, tips	imissions,	
				☐ Operating a business		☐ Operating a	business	
		dar year befo December 3		■ Wages, commissions, bonuses, tips	\$146,000.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	List each	•	e gross inco	se and you have income that yome from each source separate	9	hat you listed in lir		
				Debtor 1	0	Debtor 2		0
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
5.	Are either No.	Debtor 1's of Neither Delindividual properties of No. Yes * Subject to Debtor 1 or	or Debtor 2 btor 1 nor E rimarily for a 30 days befor Go to line 7 List below 6 paid that cr not include a adjustmen Debtor 2 c 30 days befor Go to line 7 List below 6 include pay	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the ton 4/01/25 and every 3 years or both have primarily consu one you filed for bankruptcy, di	r debts? Immer debts. Consumer debt Id purpose." d you pay any creditor a total d a total of \$7,575* or more hits for domestic support oblig his bankruptcy case. Is after that for cases filed on himmer debts. d you pay any creditor a total d a total of \$600 or more and	I of \$7,575* or mo n one or more pay pations, such as ch or after the date of I of \$600 or more?	re? ments and th ild support ar f adjustment.	ne total amount you nd alimony. Also, do creditor. Do not
	Creditor'	s Name and	Address	Dates of payme		Amount you still owe	Was this p	ayment for
	P.O. Bo	one Bank x 98873 as, NV 891	93	02/24 - 04/24	paid \$1,804.56	\$1,289.00	☐ Mortgag ☐ Car ☐ Credit C	ard

☐ Suppliers or vendors

□ Other

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Case number (if known) Debtor 1 Glyn Neal Owen

Credit One Bank P.O. Box 98873 Las Vegas, NV 89193		Total amount paid	Amount you still owe	Was this payment for
Las vegas, NV 89193	02/24 - 04/24	\$2,567.54	\$612.00	☐ Mortgage ☐ Car
				Credit Card
				☐ Loan Repayment
				☐ Suppliers or vendors
				Other
Credit One Bank	02/24 - 04/24	\$1,329.67	\$219.00	☐ Mortgage
P.O. Box 98873 Las Vegas, NV 89193				□ Car
Las vegas, INV 09193				Credit Card
				Loan Repayment
				☐ Suppliers or vendors
				Other
Bank of America	03/24 - 04/24	\$9,467.46	\$10,511.00	☐ Mortgage
PO Box 5170 Simi Valley, CA 93062				☐ Car
Simi Valley, CA 93062				Credit Card
				☐ Loan Repayment
				☐ Suppliers or vendors
				☐ Other
■ No □ Yes. List all payments to an insider.				
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	uptcy, did you make any pa	nyments or transfer a	nny property on a	ccount of a debt that benefited
Nithin 1 year before you filed for bankrunsider? nclude payments on debts guaranteed or	cosigned by an insider.			
nsider?	cosigned by an insider.			
nsider? nclude payments on debts guaranteed or	cosigned by an insider.			
nsider? nclude payments on debts guaranteed or No	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
nsider? nclude payments on debts guaranteed or ■ No □ Yes. List all payments to an insider	Dates of payment			
nsider? nclude payments on debts guaranteed or No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossess Within 1 year before you filed for bankru List all such matters, including personal inj	Dates of payment sions, and Foreclosures uptcy, were you a party in a	paid any lawsuit, court ac	still owe	Include creditor's name
nsider? nclude payments on debts guaranteed or No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossess Within 1 year before you filed for bankru	Dates of payment sions, and Foreclosures uptcy, were you a party in a	paid any lawsuit, court ac	still owe	Include creditor's name
nsider? nclude payments on debts guaranteed or No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossess Within 1 year before you filed for bankru List all such matters, including personal inj	Dates of payment sions, and Foreclosures uptcy, were you a party in a	paid any lawsuit, court ac	still owe	Include creditor's name
nsider? nclude payments on debts guaranteed or No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossess Within 1 year before you filed for bankruist all such matters, including personal injudifications, and contract disputes. No	Dates of payment sions, and Foreclosures uptcy, were you a party in a	paid any lawsuit, court ac	still owe	Include creditor's name
nsider? nclude payments on debts guaranteed or No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossess Within 1 year before you filed for bankru List all such matters, including personal inj modifications, and contract disputes. No Yes. Fill in the details. Case title	Dates of payment sions, and Foreclosures uptcy, were you a party in a ury cases, small claims action	paid any lawsuit, court acus, divorces, collection	still owe	Include creditor's name rative proceeding? actions, support or custody
nsider? nclude payments on debts guaranteed or No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossess Within 1 year before you filed for bankrubist all such matters, including personal injunctifications, and contract disputes. No Yes. Fill in the details. Case title Case number	Dates of payment sions, and Foreclosures uptcy, were you a party in a ury cases, small claims actio	paid any lawsuit, court acuse, divorces, collection Court or agency	still owe tion, or administe n suits, paternity a	Include creditor's name rative proceeding? actions, support or custody Status of the case
nsider? nclude payments on debts guaranteed or No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossess Within 1 year before you filed for bankru List all such matters, including personal inj modifications, and contract disputes. No Yes. Fill in the details. Case title	Dates of payment sions, and Foreclosures uptcy, were you a party in a ury cases, small claims action	paid any lawsuit, court acus, divorces, collection	still owe	Include creditor's name rative proceeding? actions, support or custody

7.

8.

9.

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Debtor 1 Glyn Neal Owen Case number (if known)

	Case title Case number	Nature of the case	Court or agency	Status of the case	
	CGH Technologies v. Owen	Complaint to Convert Real Property Title	Prince William County Circuit Court 9311 Lee Avenue Manassas, VA 20110	■ Pending □ On app □ Conclud	eal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, foreclosed	, garnished, attache	d, seized, or levied?
	☐ No. Go to line 11.				
	Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
	20117	Explain what happene	d	••	440.000.00
	CGH Technologies, Inc. 600 Maryland Ave SW, Ste 800W Washington, DC 20024	Bank Garnishment ☐ Property was reposse ☐ Property was foreclose		pending	\$13,000.00
		Property was garnish	ned.		
		☐ Property was attache	ed, seized or levied.		
12.	Creditor Name and Address Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes			Date action was taken assignee for the ben	Amount
Pai	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ■ No ■ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value of more the	nan \$600 per person	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup ☐ No	otcy, did you give any gift	s or contributions with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cor	ntribution.			
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you	u contributed	Dates you contributed	Value
	Salvation Army			various	\$1,000.00
	Ronald McDonald House			monthly	\$50.00

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Dek	btor 1 Glyn Neal Owen		Case number (if known)				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.		Describe what you contributed		Dates you contributed	Value	
	Compassion International	oue,			monthly	\$40.00	
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?						
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lose the amount that insurance has paid. List nce claims on line 33 of Schedule A/B: Pr	pending	Date of your loss	Value of property lost	
Par	t 7: List Certain Payments or Transfe						
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						
	□ No■ Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if No	: You	Description and value of any proper transferred	ty	Date payment or transfer was made	Amount of payment	
	Abacus Credit Counseling 3413 Alginet Drive Encino, CA 91436		Credit counseling		05/24	\$25.00	
	Fisher-Sandler, LLC 12801 Darby Brooke Court Suite 201 Woodbridge, VA 22192		filing fee, credit report, attorney	fees	05/24	\$1,311.00	
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.						
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment	
	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No						
	Yes. Fill in the details. Person Who Received Transfer		Description and value of	Describe a	any property or	Date transfer was	
	Address Resear's relationship to you		property transferred		received or debts	made	
	Person's relationship to you						

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Debtor 1 Glyn Neal Owen

Case number (if known)

	Person Who Received Transfer Address	Description and property transfer		Describe any property or payments received or debts paid in exchange		Date transfer was made
	Person's relationship to you			para m concessarige		
	Glyn Owen 1131 Tournai Court Woodbridge, VA 22191	1131 Tournai C originally in the Debtor alone fr 2/15/21, when i	e name of the om 2001 until	None	(04/24
	Self	transferred to his wife as tena entireties. In A Debtor and his transferred the back to Debtor	nimself and ants by the pril, 2024 wife property			
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pre No ☐ Yes. Fill in the details.		ny property to a s	elf-settled trust or s	imilar device of	which you are a
	Name of trust	Description and	value of the prope	erty transferred		Date Transfer was
						made
Par	t 8: List of Certain Financial Accounts, In	struments, Safe Deposi	it Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, asso	or other financial accou	nts; certificates o	of deposit; shares in		
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	t or Date according closed, so moved, o transferre	old, r	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, any	safe deposit box o	r other deposito	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		escribe the contents	
22.	Have you stored property in a storage unit	or place other than you	r home within 1 y	ear before you filed	for bankruptcy	?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the conten	ts	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any property	you borrowed from	ı, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the proper	ty	Value

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Debtor 1 Glyn Neal Owen

☐ A partner in a partnership

(Number, Street, City, State and ZIP Code)

☐ An officer, director, or managing executive of a corporation

No. None of the above applies. Go to Part 12.

lacksquare An owner of at least 5% of the voting or equity securities of a corporation

Yes. Check all that apply above and fill in the details below for each business.

Part 10: Cive Details About Environmental Information

Case number (if known)

Га	Give Details About Environmental informa	uon			
For	the purpose of Part 10, the following definitions a	apply:			
•	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these sub Site means any location, facility, or property as of	r, land, soil, surface water, ground stances, wastes, or material. defined under any environmental	dwa	ter, or other medium, including sta	atutes or
_	to own, operate, or utilize it, including disposal s				
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or si		s wa	iste, nazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wher	n the	ey occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable) un	der or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
25. H	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	iron	mental law? Include settlements a	ind orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Par	t 11: Give Details About Your Business or Conr	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have ar	ny o	f the following connections to any	business?
26. I	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity,	, eitl	ner full-time or part-time	
	☐ A member of a limited liability company ((LLC) or limited liability partnersh	nip (i	LLP)	

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

Describe the nature of the business

Name of accountant or bookkeeper

Business Name

Address

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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United States Bankruptcy Court Eastern District of Virginia

In 1	re Glyn Neal Owen	Case No)	
	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENSATION OF		DEBTOR	
	IN A CHAPTER 13	<u>CASE</u>		
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify the compensation paid to me, for services rendered or to be rendered on behalf bankruptcy case is as follows:			
	For legal services, I have agreed to accept	\$	5,000.00	
	Prior to the filing of this statement I have received	\$	1,000.00	
	Balance Due		4,000.00	
2.	\$313.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor \square Other (specify)			
4.	The source of compensation to be paid to me is:			
	■ Debtor \square Other (specify)			
5.	■ I have not agreed to share the above-disclosed compensation with any other	r person unless they are mo	embers and associates of r	ny law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or p copy of the agreement, together with a list of the names of the people sharing			v firm. A
6.	In return for the above-disclosed fee, I have agreed to render legal service for a Bankruptcy Rule $2016-1(C)(3)$.	all aspects of the bankruptc	y case, as required by Loc	al
7.	I am electing to request compensation and reimbursement of expenses in this ca	ase:		
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Re	ule 2016-1(C)(1)(a) and (C)(3)(a).	
	b. \square By submitting applications for compensation in the manner set forth i	n Local Bankruptcy Rule 2	2016-1(C)(1)(c)(ii).	
	An attorney for the debtor that fails to make the election to request compen $(C)(3)(a)$ at the commencement of the case will be deemed to have elected Bankruptcy Rule 2016-1(C)(1)(c)(ii).			

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CERTIFICATION

I certify that the foregoing is an accurate statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 13, 2024	/s/ Michael J. O. Sandler
Date	Michael J. O. Sandler
	Signature of Attorney

Fisher-Sandler, LLC

Name of Law Firm

12801 Darby Brooke Court
Suite 201

Woodbridge, VA 22192

703-494-3323 Fax: 703-910-6235

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

пап). _May 13, 2024	/s/ Michael J. O. Sandler	
Date	Michael J. O. Sandler	
	Signature of Attorney	

Fill in this information to identify your case:					
Debtor 1	Glyn Neal Owen				
Debtor 2 (Spouse, if filing)					
United States B	Sankruptcy Court for the: Eastern District of Virginia				
Case number (if known)					

Ch	eck	as directed in lines 17 and 21:				
According to the calculations required by this Statement:						
		1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
		2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
		3. The commitment period is 3 years.				
		4. The commitment period is 5 years.				

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 13,900.00 12,115.78 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

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Case number (if known)

			Column A Debtor 1		Column B Debtor 2	or	
7.	Interest, dividends, and royalties		\$	0.00	_	0.00	
	Unemployment compensation		\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a bene the Social Security Act. Instead, list it here:	efit under					
	For you\$.00					
		.00					
	Pension or retirement income. Do not include any amount received that we benefit under the Social Security Act. Also, except as stated in the next sentenct include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injudisability, or death of a member of the uniformed services. If you received an pay paid under chapter 61 of title 10, then include that pay only to the extent does not exceed the amount of retired pay to which you would otherwise be if retired under any provision of title 10 other than chapter 61 of that title.	ence, do he ury or ny retired that it	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the source and a Do not include any benefits received under the Social Security Act; payment received as a victim of a war crime, a crime against humanity, or international domestic terrorism; or compensation, pension, pay, annuity, or allowance pay United States Government in connection with a disability, combat-related injudisability, or death of a member of the uniformed services. If necessary, list of sources on a separate page and put the total below.	s al or aid by the ury or					
			\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$1	3,900.00	+ \$	12,115.78	Total average monthly incor	
Part						\$ 26.015.	70
13.	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:					\$ 26,015.	
	You are not married. Fill in 0 below.						
	☐ You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse						
	Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.	come dev	oted to eac	h purpos	se. If necessar	y, list additional	
	If this adjustment does not apply, enter 0 below. Wife's credit cards	\$	1,244.0	00			
		\$		_			
		_ \$					
	Total	\$	1,244.0	00 0	Copy here=>	- 1,24	4.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$ 24,771.	78
15.	Calculate your current monthly income for the year. Follow these steps	s:					
	15a. Copy line 14 here=>					\$ 24,771 .	78

Glyn Neal Owen

Debtor 1

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Debto	or 1	Gly	n Neal Owen		Case number (if known)		
		М	ultiply line 15a by 12 (the number of months in a	year).			x 12
	15	o. Ti	ne result is your current monthly income for the y	ear for this part of the	e form	\$_	297,261.36
16.	Cal	culate	the median family income that applies to you	u. Follow these steps	:		
	16a	Fill i	n the state in which you live.	VA			
	16b	Fill i	n the number of people in your household.	2			
	16c		the median family income for your state and siz			\$_	95,482.00
			nd a list of applicable median income amounts, ${\mathfrak g}$ uctions for this form. This list may also be available				
17.	Hov	/ do t	he lines compare?				
	17a		Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO				
	17b		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 abo	tion of Your Dispos			
Part	3:	Ca	lculate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)			
18.	Cop	у уо	ur total average monthly income from line 11 .			\$	26,015.78
19.	spo	end t use's	the marital adjustment if it applies. If you are me hat calculating the commitment period under 11 lincome, copy the amount from line 13. The marital adjustment does not apply, fill in 0 on linger.	J.S.C. § 1325(b)(4) a	s not filing with you, and you allows you to deduct part of your	-\$	1,244.00
	19b	Sub	tract line 19a from line 18.			\$_	24,771.78
20.	Cal	culate	your current monthly income for the year. F	ollow these steps:			04 774 70
	20a	Cop	y line 19b			\$_	24,771.78
		Mult	iply by 12 (the number of months in a year).				x 12
	20b	The	result is your current monthly income for the yea	r for this part of the fo	orm	\$_	297,261.36
	20c	Сор	y the median family income for your state and siz	e of household from	line 16c	\$_	95,482.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court	, on the top of page 1 of this form, che	eck box 3,	The commitment
			Line 20b is more than or equal to line 20c. Unlescommitment period is 5 years. Go to Part 4.	ss otherwise ordered	by the court, on the top of page 1 of t	his form, c	theck box 4, The
Part			gn Below g here, under penalty of perjury I declare that the	information on this s	statement and in any attachments is tr	ue and cor	rrect.
Х			n Neal Owen				
			eal Owen e of Debtor 1				
	Date		y 13, 2024 1/DD /YYYY				
	If yo		ecked 17a, do NOT fill out or file Form 122C-2.				
l	If vo	u che	cked 17h, fill out Form 122C-2 and file it with this	s form. On line 39 of	that form, copy your current monthly in	ncome from	m line 14 ahove

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Debtor 1 Glyn Neal Owen Case number (if known)

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Fill in t	his information to	dentify your case:	
Debtor	1 Glyn Nea	Owen	
Debtor	2		
(Spouse	e, if filing)		
United S	States Bankruptcy C	ourt for the: Eastern District of Virginia	
Case no		☐ Check if th	is is an amended filing
(II KIIOW	(11)		0 10 am amonada ming
	Form 122C-2		
Chap	oter 13 Cald	culation of Your Disposable Income	04/22
	ut this form, you wi tment Period (Offici	Il need your completed copy of <i>Chapter 13 Statement of Your Current Monthly Inco</i> al Form 122C-1).	ne and Calculation of
space is	s needed, attach a s	te as possible. If two married people are filing together, both are equally responsible eparate sheet to this form, Include the line number to which additional information r name and case number (if known).	
Part 1:	Calculate Your	Deductions from Your Income	
the c	uestions in lines 6	ervice (IRS) issues National and Local Standards for certain expense amounts. Use 15. To find the IRS standards, go online using the link specified in the separate instead at the bankruptcy clerk's office.	
expe	nses if they are high	unts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you er than the standards. Do not include any operating expenses that you subtracted from incet any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1	come in lines 5 and 6 of Form
If you	ur expenses differ fro	m month to month, enter the average expense.	
Note	: Line numbers 1-4 a	re not used in this form. These numbers apply to information required by a similar form us	ed in chapter 7 cases.
5.	The number of peo	ple used in determining your deductions from income	
		people who could be claimed as exemptions on your federal income tax return, ny additional dependents whom you support. This number may be different from e in your household.	2
Natio	onal Standards	You must use the IRS National Standards to answer the questions in lines 6-7.	
		other items: Using the number of people you entered in line 5 and the IRS National dollar amount for food, clothing, and other items.	\$1,389.00
	the dollar amount fo people who are 65 c	h care allowance: Using the number of people you entered in line 5 and the IRS Nationa out-of-pocket health care. The number of people is split into two categoriespeople who rolderbecause older people have a higher IRS allowance for health car costs. If your acamount, you may deduct the additional amount on line 22	are under 65 and

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Debtor 1 Glyn Neal Owen Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 158.00 Copy here=> \$ 158.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 \$ Copy here=> 0.00 7g. Total. Add line 7c and line 7f 158.00 Copy total here=> \$ 158.00 You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 687.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,245.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Rocket Mortgage** 2.833.44 Copy Repeat this amount 2,833.44 9b. Total average monthly payment 2.833.44 here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00

Explain why:

or rent expense). If this number is less than \$0, enter \$0.

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

here=>

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Debtor 1 Glyn Neal Owen Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 294.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Describe Vehicle 1: Vehicle 1 2014 Lincoln MKZ 13a. Ownership or leasing costs using IRS Local Standard..... 629.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Bank of America** 285.07 Repeat this Copy amount on **Total Average Monthly Payment** 285.07 285.07 line 33b. 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 343.93 343.93 Vehicle 2 Describe Vehicle 2: 0.00 13d. Ownership or leasing costs using IRS Local Standard..... 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Сору Repeat this here amount on line Total average monthly payment 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Glyn Neal Owen Case number (if known)

		addition to the expense deductions listed above, you are allowed your monthly expenses e following IRS categories.	s for	
16.	self-employment taxes, social your pay for these taxes. Howe	unt that you will actually pay for federal, state and local taxes, such as income taxes, security taxes, and Medicare taxes. You may include the monthly amount withheld from ever, if you expect to receive a tax refund, you must divide the expected refund by 12 the total monthly amount that is withheld to pay for taxes. es, or use taxes.	\$_	6,135.00
17.	Involuntary deductions: The contributions, union dues, and	total monthly payroll deductions that your job requires, such as retirement uniform costs.		
	Do not include amounts that ar	re not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$_	0.00
18.	filing together, include paymen	on thly premiums that you pay for your own term life insurance. If two married people are not stat you make for your spouse's term life insurance. If two married people are fe insurance on your dependents, for a non-filing spouse's life insurance, or for any form m.	\$_	325.00
19.	administrative agency, such as	e total monthly amount that you pay as required by the order of a court or s spousal or child support payments. ast due obligations for spousal or child support. You will list these obligations in line 35.	\$	850.00
20		amount that you pay for education that is either required:	_	
_0.	as a condition for your job,			
	_	ally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	·	amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. ny elementary or secondary school education.	\$	0.00
22.	that is required for the health a	nses, excluding insurance costs: The monthly amount that you pay for health care and welfare of you or your dependents and that is not reimbursed by insurance or paid include only the amount that is more than the total entered in line 7.	_	0.00
	·	or health savings accounts should be listed only in line 25.	\$_	0.00
23.	for you and your dependents, sphone service, to the extent ne income, if it is not reimbursed I Do not include payments for be	chone services: The total monthly amount that you pay for telecommunication services such as pagers, call waiting, caller identification, special long distance, or business cell ecessary for your health and welfare or that of your dependents or for the production of by your employer. asic home telephone, internet and cell phone service. Do not include self-employment red on line 5 of Official Form 122C-1, or any amount you previously deducted.	+\$_	0.00
24	Add all of the expenses allow	wed under the IRS expense allowances.	\$	
24.	Add lines 6 through 23.		Ψ—	10,181.93
	Add lines 6 through 23. ditional Expense Deductions	These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.	Ψ_	10,181.93
Add	Health insurance, disability i insurance, disability insurance your dependents.			10,181.93
Add	ditional Expense Deductions Health insurance, disability i insurance, disability insurance	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health		10,181.93
Add	Health insurance, disability i insurance, disability insurance your dependents.	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health, and health savings accounts that are reasonably necessary for yourself, your spouse, o		10,181.93
Add	Health insurance, disability i insurance, disability insurance your dependents. Health insurance	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health, and health savings accounts that are reasonably necessary for yourself, your spouse, o \$390.00_		10,181.93
Add	Health insurance, disability insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health, and health savings accounts that are reasonably necessary for yourself, your spouse, o \$ 390.00 \$ 145.00 \$ 20.55		567.50
Add	Health insurance, disability i insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health, and health savings accounts that are reasonably necessary for yourself, your spouse, o \$ 390.00 \$ 145.00 + \$ 32.50 Copy total here=>	or	
Add	Health insurance, disability insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health, and health savings accounts that are reasonably necessary for yourself, your spouse, o \$ 390.00 \$ 145.00 + \$ 32.50 Copy total here=>	or	
Add 25.	Health insurance, disability insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you Yes Continuing contributions to continue to pay for the reasonayour household or member of	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health, and health savings accounts that are reasonably necessary for yourself, your spouse, o \$ 390.00 \$ 145.00 + \$ 32.50 \$ 567.50 Copy total here=>	or	
25. 26.	Health insurance, disability is insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you Yes Continuing contributions to continue to pay for the reasons your household or member of yinclude contributions to an accidence.	Note: Do not include any expense allowances listed in lines 6-24. insurance, and health savings account expenses. The monthly expenses for health, and health savings accounts that are reasonably necessary for yourself, your spouse, or \$\frac{390.00}{145.00}\$ \$\frac{145.00}{567.50}\$ Copy total here=> al amount? actually spend? \$\frac{1}{2}\$ The actual monthly expenses that you will able and necessary care and support of an elderly, chronically ill, or disabled member of your immediate family who is unable to pay for such expenses. These expenses may	or \$	567.50

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btor 1	Glyn Neal Owen	Cas	se number (if know	n)				
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operatin	g expen	ses on			
	If you believe that you have home energy on the fill in the excess amount of home er	osts that are more than the home energy cos ergy costs	ts included in	expense	s on lin	е		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must	show that the	additiona	al	\$	i	0.00
		Iren who are younger than 18. The monthly pendent children who are younger than 18 ye						
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why th	e amour	nt			
	* Subject to adjustment on 4/01/25, and eve	ery 3 years after that for cases begun on or a	fter the date of	adjustm	ent.	\$;	0.00
		he monthly amount by which your actual food allowances in the IRS National Standards. T s in the IRS National Standards.						
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		oarate				
	You must show that the additional amount	claimed is reasonable and necessary.				\$	i	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	e amount that you will continue to contribute in inization. 11 U.S.C. § 548(d)(3) and (4).	n the form of c	ash or fi	nancial			
	Do not include any amount more than 15%	of your gross monthly income.				\$	i	100.00
	Add all of the additional expense deductions. Add lines 25 through 31.							667.50
Dedi	ections for Debt Payment							
33. F	or debts that are secured by an interest	in property that you own, including home	mortgages, v	ehicle				
lo	pans, and other secured debt, fill in lines	33a through 33e.						
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	e to each sec	ured				
	Mortgages on your home						rage i ment	monthly
33a.	Copy line 9b here				=>	\$,833.44
	Loans on your first two vehicles					· -		,
33b.					=>	\$		285.07
33c.						ф Ф		
33C.	Copy line 13e nere				=>	Φ_		0.00
33d. Name	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt	ir	oes pay clude ta	xes			
	-NONE-		_			•		
				1 163		\$ _		
] No				
] Yes		\$		
				1		· -		
			_					
] Yes	+	\$_		
33e	Total average monthly payment. Add lines	: 22a through 22d	\$ 3,1	18.51	Copy total here		6	3,118.51

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Glyn Neal Owen Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷ 60 0.00 36. Projected monthly Chapter 13 plan payment 7,500.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 10.00 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 750.00 750.00 here=> \$ Average monthly administrative expense 3,868.51 37. Add all of the deductions for debt payment. Add lines 33e through 36. Total Deductions from Income 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 10,181.93 expense allowances Copy line 32, All of the additional expense deductions 667.50 Copy line 37, All of the deductions for debt payment +\$ 3,868.51 14,717.94 14.717.94 Total deductions..... Copy total here=>

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Glyn Neal Owen				Case number (if known)						
2:	Determine Yo	our Disposable Income Under 11 U.S.C. §	1325(b)(2)						
		rrent monthly income from line 14 of Form Current Monthly Income and Calculation			d			\$_		24,771.7
D. Fill in any reasonably necessary income you receive for support for dependen children. The monthly average of any child support payments, foster care payments disability payments for a dependent child, reported in Part I of Form 122C-1, that yo received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.			care payments, or 2C-1, that you	r	\$_	0	.00			
Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, a specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here			plans, as specific		\$_	2,590.00				
			y line 38 here	=>	\$	14,717	.94			
expo thei	enses and you l r expenses. You	cial circumstances. If special circumstance have no reasonable alternative, describe the unust give your case trustee a detailed expl documentation for the expenses.	specia	d circumstances	and					
scrik	e the special o	ircumstances		Amount of expense						
-				\$						
-				\$		_				
-				\$						
		To	tal \$_	0.00		Cop here	e=> \$ 	(0.00	
Tot	al adjustments	. Add lines 40 through 43.		=>	\$		17,307.94	Cop	y :=> - \$	17,307.9
101	ai aujustinents	. Add liftes 40 tillough 45.			<u>Ψ</u> -				Ψ	17,007.0
Cal	culate your mo	onthly disposable income under § 1325(b)	(2). Sul	btract line 44 fror	n line	e 39		:	\$	7,463.84
								L		
:	Change in In	come or Expenses								
		or expenses. If the income in Form 122C-1 re virtually certain to change after the date you	ou filed	your bankruptcy if the wages repo	petit orted	tion a	and during the eased after			
you wag	e your case will l filed your petition ges increased, fi	be open, fill in the information below. For exa on, check 122C-1 in the first column, enter lin Il in when the increase occurred, and fill in th	ne 2 in	unt of the increas	se.	Ċ	·			
you wag n	e your case will filed your petition ges increased, fi	on, check 122C-1 in the first column, enter lir	ne 2 in		se.		Increase or decrease?	Am	nount of cha	ange
you wag m	e your case will l filed your petition ges increased, file Line	on, check 122C-1 in the first column, enter lir Il in when the increase occurred, and fill in th	ne 2 in	unt of the increas	se.		Increase or	Am	nount of ch	ange
you wag n 22C 22C	e your case will lifeld your petitions increased, find Line Line -1 -2 -1	on, check 122C-1 in the first column, enter lir Il in when the increase occurred, and fill in th	ne 2 in	unt of the increas	se.		Increase or decrease? Increase Decrease Increase	\$	nount of cha	ange
you wag m 122C 122C 122C	e your case will lifled your petition ges increased, find Line Line Line -1 -2 -1 -1	on, check 122C-1 in the first column, enter lir Il in when the increase occurred, and fill in th	ne 2 in	unt of the increas	se.	· 	Increase or decrease? Increase Decrease Increase Decrease Decrease		nount of cha	ange
you	e your case will ifiled your petition ges increased, file Line Line 1-1 1-2 1-1 1-2 1-1	on, check 122C-1 in the first column, enter lir Il in when the increase occurred, and fill in th	ne 2 in	unt of the increas	se.	· -	Increase or decrease? Increase Decrease Increase	\$	nount of cha	ange

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Owen Case number (if known)	
v	
, under penalty of perjury you declare that the information on this statement and in any attachments is true and co	orrect
, under penalty of perjury you declare that the information on this statement and in any attachments is the and ec	Troot.
ll Owen	
wen	
ebtor 1	
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YY	
ebtor 1	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Bank of America Attn: Bankruptcy Po Box 982234 El Paso, TX 79998

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

CGH Technologies, Inc. 600 Maryland Ave SW, Ste 800W Washington, DC 20024

Citibank/Best Buy Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Credit One Bank Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113

Deliese Owen 1131 Tournai Court Woodbridge, VA 22191

FreedomPlus Attn: Bankruptcy 1875 South Grant St, Ste 400 San Mateo, CA 94402

Gross, Romanick, Dean & Desimo 3975 University Drive Suite 410 Fairfax, VA 22030

Rocket Mortgage Attn: Bankruptcy 1050 Woodward Avenue Detroit, MI 48226 Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Uplft/cb Attn: Bankruptcy 440 N. Wolfe Road Sunnyvale, CA 94085